(FAX)973 956 8811

P.001/002



11 VREELAND AVENUE, TOTOWA, NJ 07512 TELEPHONE: (973) 956-8700 - FACSIMILE: (973) 958-8811

Environmental Services

FACSIMILE TRANSMISSION COVER SHEET

Date

9/30/2016

To

NJ Department of Labor/ Asbestos Control

Attn.

Tom Voorhees

Fax# :

609-633-0664

From:

Viveca

Number of pages:

1

WAINER APPROVED

RE: Emergency Notification for Hoboken Train Terminal, Hoboken, NJ

Please see the attached emergency notification for the clean up of roofing debris.

If you have any questions, please feel free to contact our office. Thank you!

09/30/2018 15:37 Two Brothers Contracting

FAX)973 956 8811

P.002/002

Print Form

| Date of Notification (1) 9/30/2016 Agandes Notification Type Notification | | | | | G 8:40 an | | | ,, | • | . 1 | | | | | |
|---|-----------------------------|----------------------------------|--|------------------------------------|-------------------------------|---|-------------|---|---------------------------------|--------------|-------------------|---------------|--------------|-------------|--|
| | | | NJT | RANSI | g Owner/o | Operator | (2) | | F | | | . | (| 7 | |
| E EPA Initial | | | Street Address ONE PENN PLAZA City, State, Zip Code NEWARK, NJ 07105 Name of Contact | | | | | | + | Skels | | V. 18 | | 1 | |
| Amendment in | ndudin | <u> </u> | | | | | | | | | V 3. 'A. | 1 | <u>/</u> :: | 1 | |
| DOH justification) Cancellation | justification) | | | | | | | | Tai | 2-230-94 | mber: | | | · · · · · · | |
| Name of Facility Where Abatement is Taking HOBOKEN LIGHT RAIL TERMINAL | Place (| (3) | PAC | ILITY IN | PORMAT | NON | Турн | of Facility | (4) | | | _ | | | |
| Pireet Address 1 HUDSON PLACE | ^ | | | | | School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, | | | | | | | | | |
| HOBOKEN | | - | | - | - | | | ato.) are Feet | | Ploors | | ildg. / | | D3 , | |
| County (6) HUDSON | | County Code (7) (STATE USE ONLY) | | | | | ent Use (Pr | or if beli | ng damolie | hed) | | | | | |
| Name of Monitoring Firm Hired by Building O N/A |) | ASCM No. Name | | | | I of Abstament Contractor (9) O BROTHERS CONTRACTING, INC. | | | | | | | | | |
| Breet Address | | . Street | | | | LAGORES /REELAND AVENUE | | | | | | | | | |
| ity, Stata, Zip Code | | City, | | | | State, Zip Code TOWA, NJ 07512 | | | | | | | | | |
| raject Manager for Monitoring Pirm var Data (16) | | i 197 | | | | 973-956-8700 | | | | Licansa No. | | | | | |
| 9/30/2016 | 018 | | | | | of OSHA Monitor ME AS (0) ABOVE | | | | | | | | | |
| Facility Closed/Vacated During Entire Pa Abatement Performed Outside of Norma Other - Describe: | ۸۴ . | ment | | | | Address Sigte, Zip Code | | | | | | | | | |
| cops of Work (Check All That Apply) a3 af or ≥3 if a160 ef or ≥260 if | | Ranoya Demoili | | | | I. | al al | ili Conteinm In-Encloaum ovebag Proposesson-Exempte |) Nariusa | | | | | | |
| Location of Asbestos-Containing Material (AOM) | Locati Normal ed Sola | ally Department | | | | ~ | | | | | Abatement Type | | | | |
| IN Facility (13) | Maintenance/ Asoni | | | | atos Conti hemal auriac | os Containing Maseriai (ACM) hermal systems insulation, auriscing, VAT, or other miscellangous) | | | Amount (Specify SF or LF) | | Remova | Rapair | Encapsulate | Endosuse | |
| CONCOURSE BETWEEN | | | N/A | CLEA | NUPC | OF ROOF DEBRIS | | | | | Ľ. | | * | * | |
| TRACKS 9 & 1 | | | | | 1100 | Jr L | EBRIS | | | X | | | | | |
| me of Registered Weste Heuler | | | | | | | | | _ | | - | | | | |
| TWO BROTHERS CONTRACTING | | | | UDEP Wasts Cubic Yards of Wasts 20 | | | | | | red Landfill | | - | . (61 * | _ | |
| y, State | | | J/ 70 | | Diepos | al Date | | City, State | 0 | | | .rC | ,, VV.Ş |). —— | |
| TOWA, NJ | | | | | 10/8/2 | 016 | | MORR | 101/11/1 | PR PR A | | | | | |

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

| Agencies Notified Type Notification Initial Holds Chief Part P | Date of Notification (1) 9/30/2016 | | | | Name of Building Owner/Operator (2) NJ TRANSIT | | | | | | | | | | | | | | |
|--|--|--|---------------------|---|--|--------------------------------|---------------------------------|----------------------------|--|----------|---------|------------------------------------|------|---------|--------|-------|--|--|--|
| DPP | | | 0 | | | | | | | | | | | | | | | | |
| DOH | DEP | Amended Amendment | | | | | | | | | | | | | | | | | |
| Name of Facility Where Abatement is Taking Place (3) HOBOKEN LIGHT RAIL TERMINAL Street Address HUDSON PLACE City (5) HOBOKEN County (6) HUDSON City (7) HUDSON City (8) HUDSON County (6) HUDSON County (7) City (8) HUDSON County (8) HUDSON City (8) HUDSON Ci | | justification) | | | | | ER | | | | | | | | | | | | |
| Name of Facility (where Abstement is Taking Place (3) HOBOKEN LIGHT RAIL TERMINAL Street Address 1 HUDSON PLACE County (Col. (F) HOBOKEN County (S) HOBOKEN County (S) HOBOKEN County (S) HOBOKEN County (S) HOBOKEN Square Feet # of Floors Bidg, Age County (Col. (F) (STATE USE ONLY) County (S) HOBOKEN Square Feet # of Floors Bidg, Age County (S) HOBOKEN County (S) HOBOKEN Square Feet # of Floors Bidg, Age County (S) HOBOKEN County (S) HOBOKEN Square Feet # of Floors Bidg, Age County (S) HOBOKEN County (S) HOBOKEN Square Feet # of Floors Bidg, Age County (Col. (F) (STATE USE ONLY) County (S) HOBOKEN Square Feet # of Floors Bidg, Age County (Col. (F) (STATE USE ONLY) County (S) HOBOKEN Square Feet # of Floors Bidg, Age County (Sold (F) (S) HOBOKEN Street Address 11 VREELAND AVENUE City, State, Zip Code TOTOWA, NJ 07512 For Street Address 11 VREELAND AVENUE City, State, Zip Code TOTOWA, NJ 07512 Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Olive Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Olive Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Olive Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Olive Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Olive Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Olive Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Olive Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Olive Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Olive Facility Closed/Vacated During Entire P | | | | | | - | | | | | | | | | | | | | |
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| City (6) HOBOKEN County (6) HUDSON County (7) HUDSON County (7) HUDSON County (8) HUDSON County (8) HUDSON County (8) HUDSON ASCM No. Name of Abatement Contractor (9) TWO BROTHERS CONTRACTING, INC. Street Address Street Address Street Address City, State, Zip Code ToTOWA, NJ 07512 Project Manager for Monitoring Firm Telephone No. ToTOWA, NJ 07512 Project Manager for Monitoring Firm Telephone No. ToTOWA, NJ 07512 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Custodial Staff? (12) Telephone No. Telephone No. Telephone No. Telephone No. Telephone No. ToTOWA, NJ Toto Shate Address Street Address Street Address Street Address City, State, Zip Code City, State Toto Containing Material (ACM) (Specify Type Type Toto Containing Material (ACM) (Specify Type Toto Containi | | | | Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, | | | | | | | | | | | | | | | |
| Name of Monitoring Firm Hired by Building Owner (8) N/A Street Address Street Address Street Address 11 VREELAND AVENUE City, State, Zip Code City, State, Zip Code Telephone No. Telephone Volumina Hellone No. Telephone Malerial (ACM) Telephone Maleria | | | | | | | | | | | # 0 | f Floors | В | ldg. A | ige | 0.000 | | | |
| Name of Monitoring Firm Hired by Building Owner (8) N/A Street Address 11 VREELAND AVENUE City, State, Zip Code City, State, Zip Code City, State, Zip Code ToTOWA, NJ 07512 Project Manager for Monitoring Firm Telephone No. 973-956-8700 00494 Start Date (10) 9/30/2016 Scheduled Completion Date (11) 10/6/2016 Scheduled Completion Date (11) 10/6/2016 SAME AS (9) ABOVE Street Address Street Address Street Address Street Address City, State, Zip Code City, State, Zip Code ToTOWA, NJ 07512 Project Manager for Monitoring Firm Telephone No. 973-956-8700 00494 Name of Ostal Monitor Control No. 973-956-8700 Street Address Street Address City, State, Zip Code City, State, Zip Code City, State, Zip Code Street Address City, State, Zip Code City, State, Zip Code ToTOWA, NJ 07512 Full Containment with Negative Pressure Mini-Enclosure Mini-Enclosure Mini-Enclosure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and | * ` ' | | | | Current Use (Prior if being demolished) | | | | | | | | | | | | | | |
| Street Address Street Address 11 VREELAND AVENUE City, State, Zip Code City, State, Zip | Name of Monitoring Firm Hired by Building Owner (8) ASC | | | | | | | | | | | | | | | | | | |
| City, State, Zip Code City, State, Zip Code City, State, Zip Code TOTOWA, NJ 07512 Project Manager for Monitoring Firm Telephone No. Telephone No. 973-956-8700 00494 Start Date (10) 9/30/2016 Scheduled Completion Date (11) 10/6/2016 SAME AS (9) ABOVE Streat Address Streat Address Streat Address City, State, Zip Code Cocupancy Status During Abatement (Check Only One) Streat Address City, State, Zip Code City, State Type Asbestos-Containing Material (ACM) (Specify SF or LF) City, State Type Completed by City, State TOTOWA, NJ Completed by Title City, State TotoWah, NJ Totale, NJ Tota | | 1000000 | - Capacina - C | | | | | | | | | | | | | | | | |
| Project Manager for Monitoring Firm Telephone No. Telephone No. 973-956-8700 O0494 Start Date (10) 9/30/2016 Scheduled Completion Date (11) 10/6/2016 SAME AS (9) ABOVE Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Qutside of Normal Facility Hours Other — Describe: City, State, Zip Code Full Containment with Negative Pressure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Fri | Annual Control | | | | | | | | | | | | | | | | | | |
| Start Date (10) 973-956-8700 00494 Start Date (10) 9/30/2016 Cocupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe: Scope of Work (Check All That Apply) 23 sf or 23 lf 2160 sf or 250 lf Renovation Demolition Full Containment with Negative Pressure Glovebag Procedure Normally Used Solely by In Facility (13) Location of Asbestos-Containing Material (ACM) In Facility (13) TO BE ABATED Custodial Staff? (12) Yes No N/A CONCOURSE BETWEEN TRACKS 9 & 1 Name of Registered Waste Hauler WASTE MANAGEMENT G.R.O.W.S. Scheduled Completion Date (11) Name of Registered Landfill WASTE MANAGEMENT G.R.O.W.S. Signature Date WASTE MANAGEMENT G.R.O.W.S. Signature Date WASTE MANAGEMENT G.R.O.W.S. Date | | | | | | | | | Annual Control of the | | | | | | | | | | |
| 9/30/2016 SAME AS (9) ABOVE Company Status During Abatement (Check Only One) Street Address | Project Manager for Monitoring Firm | | | | | Telephone No. | | | | | | ZEPPOLICACIONE VINCIA VINCIA PROVI | | | | | | | |
| Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe: | Start Date (10) Scheduled Co | | | | | ompletion Date (11) | | | | | | | | | | | | | |
| Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: City, State, Zip Code | | | | | | | | SAM | ME AS (9) ABOVE | | | | | | | | | | |
| Abatement Performed Outside of Normal Facility Hours Other – Describe: Scope of Work (Check All That Apply) ≥ 3 sf or ≥ 3 lf ≥ 160 sf or ≥ 260 lf Stope of Work (Check All That Apply) Stope of Work (Check All That Apply) | Occupancy Status Durin | Street | | | | | t Address | | | | | | | | | | | | |
| Renovation Demolition Second Pull Containment with Negative Pressure Procedure P | Abatement Performed Outside of Normal Facility Hours | | | | | | | City, State, Zip Code | | | | | | | | | | | |
| Demolition | Scope of Work (Check A | All That Apply) | | - | | | | | | | KACCO . | | | | | | | | |
| Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A | | The same of the sa | | | | | | × | Mini-Enclosure Glovebag Procedure | | | | | | | | | | |
| Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A CONCOURSE BETWEEN TRACKS 9 & 1 Name of Registered Waste Hauler TWO BROTHERS CONTRACTING Normally Used Solely by Maintenance / Custodial Staff? (12) Yes No N/A CLEAN UP OF ROOF DEBRIS X CLEAN UP OF ROOF DEBRIS X CLEAN UP OF ROOF DEBRIS Name of Registered Landfill WASTE MANAGEMENT G.R.O.W.S. City, State TOTOWA, NJ Completed by Title Title Title Toto Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Amount (Specify SF or LF) Amount (Specify SF or LF) Toto BROTHERS CONTRACTING Name of Registered Landfill WASTE MANAGEMENT G.R.O.W.S. Disposal Date 10/6/2016 MORRISVILLE, PA | | ocati | on | - Walliste II. | ***** | | | | | 1000 | W | | | | | | | | |
| Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A CONCOURSE BETWEEN TRACKS 9 & 1 Name of Registered Waste Hauler TWO BROTHERS CONTRACTING TWO BROTHERS CONTRACTING Name of Registered Waste Hauler TWO BROTHERS CONTRACTING Name of Registered Waste Hauler TWO BROTHERS CONTRACTING Name of Registered Waste Hauler TWO BROTHERS CONTRACTING Title Name of Registered Waste Hauler Title Disposal Date Tolok/2016 Name of Registered City, State Tolok/2016 Name of Registered City, State Tolok/2016 Name of Registered Landfill WASTE MANAGEMENT G.R.O.W.S. Signature Date Signature Date | Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility Norm Used So Mainten Custodial | | | | ly | Des | cription | of | | | | Туре | | | | | | | |
| CONCOURSE BETWEEN X CLEAN UP OF ROOF DEBRIS X TRACKS 9 & 1 Name of Registered Waste Hauler TWO BROTHERS CONTRACTING City, State TOTOWA, NJ Completed by Title Date | | | | | nce/ | tos Conta thermal surfac | aining M systems cing, VA | Materia s insu T, or | ılation, | (Specify | | Remo | Repa | Encapsi | Enclos | | | | |
| TRACKS 9 & 1 Name of Registered Waste Hauler TWO BROTHERS CONTRACTING TWO BROTHERS CONTRACTING NJDEP Waste Hauler ID No. 18743 Disposal Date 10/6/20/16 Name of Registered Landfill WASTE MANAGEMENT G.R.O.W.S. Disposal Date MORRISVILLE, PA Completed by Title Date Date Date Date Date Date Date Dat | | | | No | N/A | | 0110111 | - Incommittees of | | | | /al | = | ılate | ure | | | | |
| Name of Registered Waste Hauler TWO BROTHERS CONTRACTING City, State TOTOWA, NJ Completed by Title Date | CONCOURSE | CONCOURSE BETWEEN X | | | | CLEAN | V UP C | F RO | OOF DEBRIS | | | | Х | | | | | | |
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| TOTOWA, NJ Completed by Title Signature Date | | | | | Hauler ID No. of Was | | | te | | | | | | | | | | | |
| Completed by Title Signature Date | F0 | | | | | *** | | | | | | | | | | | | | |
| 1 1/20 11 12 14 2 14 14 21/18 21/20 | Completed by | Signature Date | | | | | | | /2016 | | | | | | | | | | |